Application or Docket Number

Effective October 1, 2003									25	3.S.Z	-66	2.3 (
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY				
T	OTAL CLAIMS		27			٠		RATE	FEE	7	RATE	FEE
FC	DR .		NUMBER FILED		NUMBER EXTRA			BASIC F	EE 385.00	OR	BASIC FEE	770.00
TO	TAL CHARGE	ABLE CLAIMS	27 - minus 20=		* 7			X\$ 9=	.	OR	X\$18=	
IN	DEPENDENT C	LAIMS	يركـ minus 3 =		* ,			X43=		1		126.00
ML	JLTIPLE DEPE	NDENT CLAIM P	RESENT		_ <i></i>			A43=		OR	X86=	86,0
<u></u>	Ab a difference		I a a a Ab a					+145=		OR	÷290=	
* If the difference in column 1 is less than zero, enter "0" in column 2						column 2		TOTAL		OR	TOTAL	982.1
CLAIMS AS AMENDED - PART II								CMALI	ENTITY	00	OTHER	
AMENDMENT A		(Column 1) (Colum CLAIMS HIGH			(Column 3)	1 :	SIVIALI	LENTITY	OR T	SMALL		
	1	REMAINING AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		XS 9=		OR	X\$18=	b 4
	Independent			<u> </u>		=		X43=		OR	X86=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		1	+290=	
								TOTA	L	OR	TOTAL	-
		(Column 1)		(Cal	0\	(0-1 0)	A	ADDIT. FE		OR	ADDIT. FEE	
AMENDMENT B	•	(Column 1) CLAIMS	T	(Colum		(Column 3)	l r		ADDI-	1 1		4551
		REMAINING AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total .	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	-	=		X43=	1	OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									Un		
								+145=		OR	+290=	
•								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST												
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMBI PREVIOL PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	Γ	X\$ 9=		OR	X\$18=	
	Independent		Minus	***		=	F	X43=		l	X86=	
٩	FIRST PRESE	NTATION OF MU	LTIPLE DEF	PENDENT	CLAIM		+	740-		OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+145=		OR	+290=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
T	he "Highest Num	ber Previously Paid	For (Total or	Independen	iess thar it) is the	i 3, enter "3." highest number						